

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

10/09/322

## CLAIMS AS FILED - PART I

|   | (Column 1)   | (Column 2)   |
|---|--------------|--------------|
| TOTAL CLAIMS  |              |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 32 minus 20= | * 0          |
| INDEPENDENT CLAIMS  | 5 minus 3 =  | * 0          |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

4/11/05

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | * 31                             | Minus ** 32                        | = 0           |
| Independent   | * 5                              | Minus *** 5                        | = 0           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

SMALL ENTITY TYPE ☐

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 150.00 |
| X\$ 25=   |        |
| X100=     |        |
| +180=     |        |
| TOTAL     |        |

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 300.00 |
| X\$50=    |        |
| X200=     |        |
| +360=     |        |
| TOTAL     |        |

SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 25=          |                |
| X100=            |                |
| +180=            |                |
| TOTAL ADDIT. FEE |                |

OR OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$50=           |                |
| X200=            |                |
| +360=            |                |
| TOTAL ADDIT. FEE |                |

(Column 1)

(Column 2)

(Column 3)

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus **                           | =             |
| Independent   | *                                | Minus ***                          | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 25=          |                |
| X100=            |                |
| +180=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$50=           |                |
| X200=            |                |
| +360=            |                |
| TOTAL ADDIT. FEE |                |

(Column 1)

(Column 2)

(Column 3)

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus **                           | =             |
| Independent   | *                                | Minus ***                          | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE    | ADDITIONAL FEE |
|---------|----------------|
| X\$ 25= |                |
| X100=   |                |
| +180=   |                |

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$50= |                |
| X200=  |                |
| +360=  |                |

## FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

| <b>Title of<br/>Invention</b>   | Subsea Intervention |                                     |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
|---|---------------------|-------------------------------------|--|-----------------|-------------|-----------|-------------|--------------------|-------------------|-----|------|----|-----|------------------------|--|------|----|-----|--|--|--|--|--|
| Application Number :  |                     |                                     |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Date :  |                     |                                     |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| First Named Applicant:  |                     | Gary L. Rytlewski                   |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Attorney Docket Number:   |                     | 22.1391CNT                          |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| <b>TOTAL FEE AUTHORIZED \$ 1158</b>   |                     |                                     |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Patent fees are subject to annual revisions on or about October 1st of each year.   |                     |                                     |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Filing as large entity  |                     |                                     |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| <b>BASIC FILING FEE</b>   |                     |                                     |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| <table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>1001</td><td>770</td><td>770</td></tr><tr><td colspan="3"></td><td>Subtotal For Basic Filing Fees: \$ 770</td></tr></tbody></table>  |                     |                                     |  | Fee Description | Fee Code    | Amount \$ | Fee Paid \$ | Utility Filing Fee | 1001              | 770 | 770  |    |     |                        | Subtotal For Basic Filing Fees: \$ 770 |      |    |     |  |  |  |  |  |
| Fee Description   | Fee Code            | Amount \$                           | Fee Paid \$                            |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Utility Filing Fee  | 1001                | 770                                 | 770                                    |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
|   |                     |                                     | Subtotal For Basic Filing Fees: \$ 770 |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| <b>EXTRA CLAIM FEES</b>   |                     |                                     |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| <table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 32</td><td>12</td><td>1202</td><td>18</td><td>216</td></tr><tr><td>Independent Claims : 5</td><td>2</td><td>1201</td><td>86</td><td>172</td></tr><tr><td colspan="3"></td><td colspan="2">Subtotal For Extra Claims Fees: \$ 388</td></tr></tbody></table> |                     |                                     |  | Fee Description | Extra Claim | Fee Code  | Amount \$   | Fee Paid \$        | Total Claims : 32 | 12  | 1202 | 18 | 216 | Independent Claims : 5 | 2                                      | 1201 | 86 | 172 |  |  |  | Subtotal For Extra Claims Fees: \$ 388 |  |
| Fee Description   | Extra Claim         | Fee Code                            | Amount \$                              | Fee Paid \$     |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Total Claims : 32   | 12                  | 1202                                | 18                                     | 216             |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Independent Claims : 5  | 2                   | 1201                                | 86                                     | 172             |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
|   |                     |                                     | Subtotal For Extra Claims Fees: \$ 388 |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| <b>AUTHORIZED BILLING INFORMATION</b>   |                     |                                     |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| <b>The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</b>   |                     |                                     |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Deposit account number:   |                     | 500457                              |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Access Code   |                     | ****                                |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Deposit name:   |                     | Schlumberger Technology Corporation |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Deposit authorized name:  |                     | Jeffrey E. Griffin                  |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Signature:  |                     | Jeffrey E. Griffin                  |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Date (YYYYMMDD):  |                     | 2004-04-28                          |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |
| Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.  |                     |                                     |  |                 |             |           |             |                    |                   |     |      |    |     |                        |  |      |    |     |  |  |  |  |  |